

**Application Data Sheet****Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Group Art Unit:: 2876  
Suggested classification:: 235/379  
Title:: AUTOMATED BANKING MACHINE  
Attorney Docket Number:: D-1159 R1 DIV  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: 3  
Total Drawing Sheets:: 22  
Small Entity:: No  
Petition included?:: No  
Secrecy Order in Parent Appl.?:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: H.  
Middle Name:: Thomas  
Family Name:: Graef  
Name Suffix::  
City of Residence:: Bolivar  
State or Province Of Residence:: OH  
Country of Residence:: US  
Street of mailing address:: Box 287  
City of mailing address:: Bolivar  
State or Province of mailing address:: OH  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 44612

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Edward  
Middle Name:: L.  
Family Name:: Laskowski  
Name Suffix::  
City of Residence:: Seven Hills  
State or Province Of Residence:: OH  
Country of Residence:: US  
Street of mailing address:: 6154 Winchester Drive  
City of mailing address:: Seven Hills  
State or Province of mailing address:: OH  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 44131

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: William  
Middle Name:: D.  
Family Name:: Beskitt  
Name Suffix::  
City of Residence:: Canton  
State or Province Of Residence:: OH  
Country of Residence:: US  
Street of mailing address:: 4817 Meadowlane Drive  
City of mailing address:: Canton  
State or Province of mailing address:: OH  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 44709

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Michael  
Middle Name::  
Family Name:: Harty  
Name Suffix::  
City of Residence:: North Canton  
State or Province Of Residence:: OH  
Country of Residence:: US  
Street of mailing address:: 6265 Walnut Ridge Circle, NW  
City of mailing address:: North Canton  
State or Province of mailing address:: OH  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 44720

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Jeffrey  
Middle Name::  
Family Name:: Eastman  
Name Suffix::  
City of Residence:: North Canton  
State or Province Of Residence:: OH  
Country of Residence:: US  
Street of mailing address:: 2152 Mohler Drive, NW  
City of mailing address:: North Canton  
State or Province of mailing address:: OH  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 44612

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Richard  
Middle Name:: J.  
Family Name:: Phelps  
Name Suffix::  
City of Residence:: Stow  
State or Province Of Residence:: OH  
Country of Residence:: US  
Street of mailing address:: 1986 Liberty Road  
City of mailing address:: Stow  
State or Province of mailing address:: OH  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 44224

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Natarajan  
Middle Name::  
Family Name:: Ramachandran  
Name Suffix::  
City of Residence:: Uniontown  
State or Province Of Residence:: OH  
Country of Residence:: US  
Street of mailing address:: 2424 Lyndon Drive  
City of mailing address:: Uniontown  
State or Province of mailing address:: OH  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 44685



**Correspondence Information**

Correspondence Customer Number:: 28995

**Representative Information**

Representative Customer Number::	28995
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Division of	09/993,070	11/13/2001
09/993,070	An application claiming the benefit under 35 USC § 119(e)	60/338,919	11/05/2001
09/993,070	Continuation-in-part of	09/911,329	07/23/2001
09/911,329	Continuation-in-part of	08/980,467	11/28/1997
09/993,070	Continuation-in-part of	09/390,929	09/07/1999
09/390,929	An application claiming the benefit under 35 USC § 119(e)	60/100,758	<u>09/17/1998</u>
09/993,070	Continuation-in-part of	09/664,698	09/19/2000
09/664,698	An application claiming the benefit under 35 USC § 119(e)	60/155,281	09/21/1999

**Assignee Information**

Assignee Name:: Diebold, Incorporated  
City of mailing address:: North Canton  
State or Province of mailing address:: OH